

## Family Information

By providing complete information about your child, you will be assisting staff in creating a positive experience for him/her while in care. List any information about your child's habits, abilities, or personality that you feel will be helpful to the staff while caring for your child.

Who is in the child's immediate family?

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Who lives at home with your child?

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Are there any special family arrangements, such as shared parenting, living in two homes, or custody specifications, etc.? Additional details?

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Are there any changes or transitions that your child has recently experienced or is experiencing? (Divorce, new home, death of family member, friend, family pet?) Additional details?

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Has your child had a previous care arrangement? (With family, in home care, center-based care, etc.?) Additional details?

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Are there any foods your child should not be fed? (Licensing requires documentation to be completed for children with food allergies and/or dietary restrictions.)

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Please describe your child's personality and behavior.

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Are there things that frighten your child? If so, how does he/she react and what do you do to comfort him/her?

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What routines/actions or items do you use to comfort your child?

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Does your child need assistance when using the toilet? If so, how?

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What words, gestures, or signs does your child use if he/she needs to use the bathroom?

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What might you and/or your child be anxious about as he/she starts in this program?

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What are you and/or your child excited about as he/she starts in this program?

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What are your expectations of this program?

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Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_